

0010/PTO  
Rev. 6/95U.S. Department of Commerce  
Patent and Trademark Office**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION**

☐ Declaration Submitted with Initial Filing      OR      ☒ Declaration Submitted after Initial Filing

Attorney Docket  
Number

H 5358 PCT/US

First Named  
Inventor

Kessler et al.

**COMPLETE IF KNOWN**

Application Number

10/763,086

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Dishwashing Detergents Containing Surfactants With Specific Diffusion Co-Efficients**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

07/13/2002

as United States Application Number or PCT International

Application Number

PCT/EP02/07820

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		YES	NO
101 36 002.9	Germany	07/24/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.



Type plus sign (+) inside this box +

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## DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP02/07820	07/13/2002	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label   
OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Stephen D. Harper	33,243		
Glenn E. J. Murphy	33,539		
Steven C. Bauman	33,832		
Gregory M. Hill	31,369		
Mary K. Cameron	34,789		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number  or label  00423 OR ☐ Fill in correspondence address below

Name	Glenn E. J. Murphy						
Address	Henkel Corporation						
Address	The Triad, Suite 200, 2200 Renaissance Blvd						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Arnd	Middle Initial		Family Name	Kessler	Suffix e.g. Jr.	
Inventor's Signature	<i>Arnd Kessler</i>				Date	12.2.04	
Residence: City	Leverskusen	State		Country	Germany	Citizenship	Germany
Post Office Address	Am Borsberg 44						
Post Office Address							
City	51375 Leverskusen	State		Zip		Country	Germany
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box →

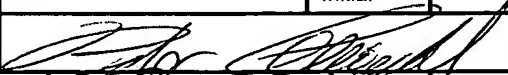
+

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Christian		Middle Initial		Family Name	Nitsch		Suffix e.g. Jr.	
Inventor's Signature					Date	07.1.04			
Residence: City	Duesseldorf		State		Country	Germany		Citizenship	Germany
Post Office Address	Otto-Hahn-Strasse 185								
Post Office Address									
City	40591 Duesseldorf		State		Zip		Country	Germany	Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Rolf		Middle Initial		Family Name	Bayersdoerfer		Suffix e.g. Jr.	
Inventor's Signature					Date	13.02.04			
Residence: City	Duesseldorf		State		Country	Germany		Citizenship	Germany
Post Office Address	Am Nettesfeld 17								
Post Office Address									
City	40589 Duesseldorf		State		Zip		Country	Germany	Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Wolfgang		Middle Initial		Family Name	Wick		Suffix e.g. Jr.	
Inventor's Signature					Date	12.02.04			
Residence: City	Dormagen		State		Country	Germany		Citizenship	Germany
Post Office Address	Auf der Hardt 8								
Post Office Address									
City	41542 Dormagen		State		Zip		Country	Germany	Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Sven		Middle Initial		Family Name	Mueller		Suffix e.g. Jr.	
Inventor's Signature					Date	12.02.04			
Residence: City	Duisburg		State		Country	Germany		Citizenship	Germany
Post Office Address	Greifswalderstrasse 24								
Post Office Address									
City	47269 Duisburg		State		Zip		Country	Germany	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

Type a plus sign (+) inside this box → ☐

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Peter		Middle Initial		Family Name	Schmiedel		Suffix e.g. Jr.	
Inventor's Signature						Date	20.02.04		
Residence: City	Duesseldorf		State		Country	Germany		Citizenship	Germany
Post Office Address	Graudenzerstrasse 27								
Post Office Address									
City	40599 Duesseldorf		State		Zip		Country	Germany	Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		Applicant Authority
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									